

Correspondence

Gaps in the literature in London medical libraries

SIR,

This past year I have been a research fellow working at various medical libraries in London. I am writing this letter to bring to your attention the fact that each of these libraries individually, and all of them collectively, fail to provide a minimally adequate resource in either medical ethics or the philosophy of medicine. No single library has more than one fifth of the works listed in the general bibliography on these subjects issued by the Hastings Institute for Society, Ethics and the Life Sciences. Such volumes as they do have are more likely to be technical works (eg, Cavalli-Sforza and Bodmer, *The Genetics of Human Populations*) than philosophical or ethical (eg, Hilton, *Ethical Issues in Genetics*), and more general works in ethics, philosophy, sociology and theology are virtually non-existent. Thus none of these libraries has a copy of the *Encyclopedia of Philosophy*, even though it is an invaluable standard reference work. But the most significant failing of the London medical libraries is bibliographical. Virtually none of the bibliographies listed in the Hastings bibliography are to be found in their collections – indeed, not one of the libraries owns a copy of the Hastings bibliography.

This poverty of resources contrasts sharply with the pressing need for informed analysis. Contemporary medicine is facing, if not a series of crises (one hates to use that much overworked term), then at least a set of focal decisions which will define, and perhaps redefine, its nature and function. What I, personally, find most distressing about this poverty of resources is not that it frustrates the physician who wishes to keep himself informed, or that it is inconvenient to a scholar on a research grant (for they are some of the few people who can actually afford the relatively large blocks of time needed to coax

material out of the British Museum), but that it inhibits, and may well prevent, working physicians from pursuing serious research in medical ethics or the philosophy of medicine.

In my view it would be extremely unfortunate if such physicians were in any way impeded from contributing to the fullest to any reconceptualization of the nature of medicine or of medical practice.

In all fairness, it should be noted that medical ethics and the philosophy of medicine are multidisciplinary activities rather than medical specialties, and, until recently, no medical group or society had a particular interest in ensuring that the medical libraries had an adequate collection in these areas. Moreover, both the library of the Royal College of Physicians and that of the Royal Society of Medicine seem to be making efforts to improve their collections (witness the relatively new 'whitish' cards in the RSM catalogue under Ethics). And the Wellcome Institute has a goodly amount of material on the philosophy of medicine and a well selected collection on pre-modern medical ethics, which, unfortunately, they have not extended to cover the development of contemporary medical ethics – thus they lack such modern classics as Henry Beecher's *Research and the Individual* and Jay Katz's *Experimentation with Human Subjects*.

Nonetheless, the unfortunate fact remains that, despite such efforts as have been made, there is no one medical library to which a researcher can turn to with a reasonable certainty of finding anything – much less the possibility of finding everything. And in the context of the challenges currently facing medicine, this is intolerable. There should be some one place which offers the researcher a complete bibliographical resource, a specialized collection of at least the five hundred odd volumes listed in the Hastings bibliography, and a rela-

tively complete journal and/or off-print collection. In short, there should be a library with a commitment to maintaining a collection on medical ethics and the philosophy of medicine.

I should have thought that this was a responsibility that the Society for the Study of Medical Ethics ought to accept.

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